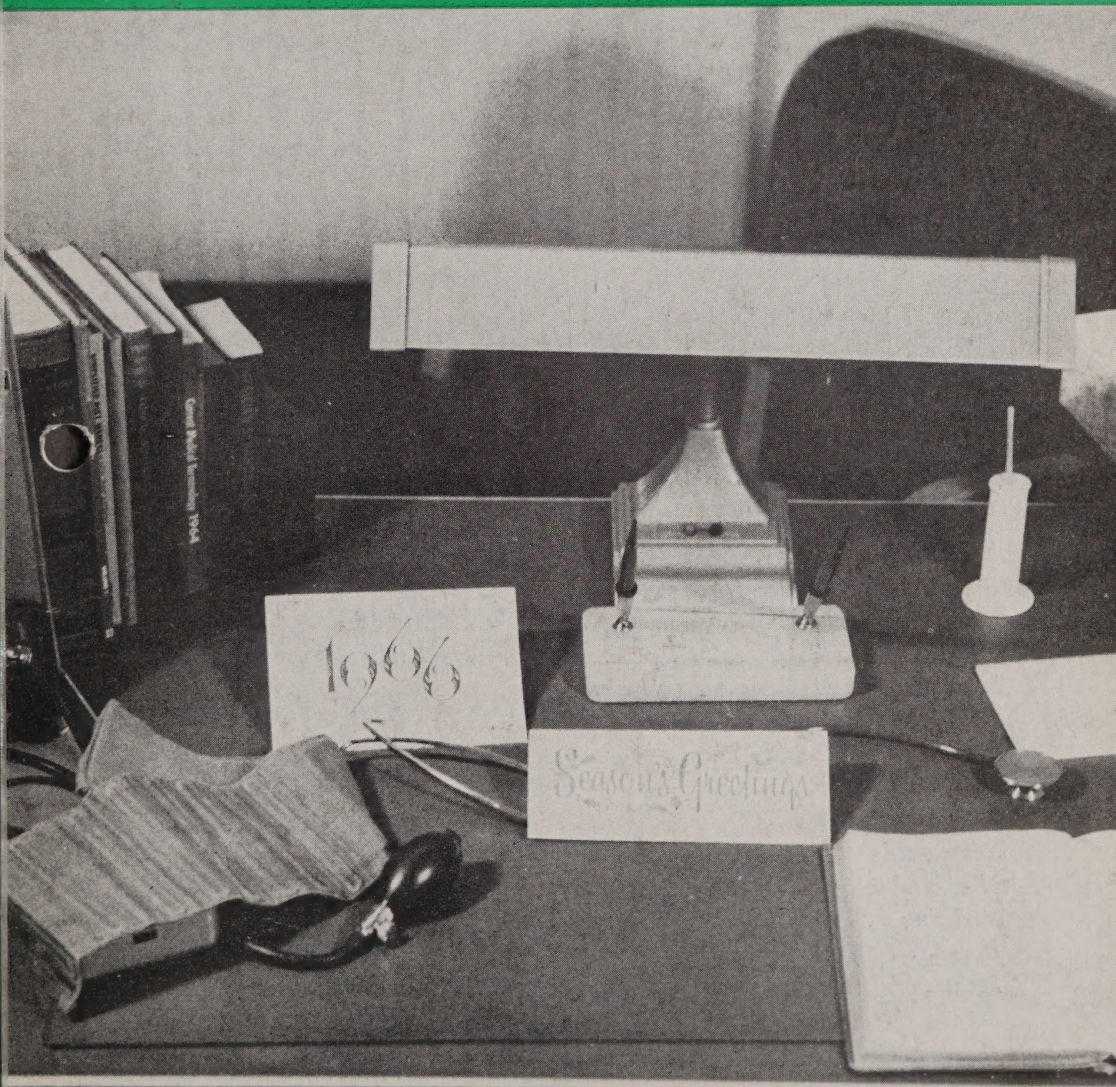
HDMS —— 125th ANNIVERSARY

The Hampden Hippocrat

A Bulletin for the Hampden District of the Massachusetts Medical Society

VOLUME XXI DECEMBER, 1965 NO. 10



RELIGION and ETHICS in MEDICINE

Hampden District Medical Society

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The Hampden Hippocrat

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THE HAMPDEN HIPPOCRAT, DECEMBER, 1965

EDITORIALS

MEDICINE AND RELIGION

by GARRY deN. HOUGH, 3rd., M.D., Chairman
MEDICO-RELIGIOUS COMMITTEE

There seems to be little doubt that the greatest problem of our era is communication. Most of our personal and social crises would evaporate if we could only transmit ideas effectively between husband and wife, physician and patient, citizen and government, nation and nation. In an effort to improve one small area of communication, the American Medical Association established a Department of Medicine and Religion in September, 1961. Its

NEXT DISTRICT MEETING, FEB. 1 (See Page 21)

purpose is "to create the proper climate for communication between the physician and clergyman that will lead to the most effective care of the patient". Hampden District Medical Society can be proud of having anticipated this program and having organized as early as 1961 one of the finest district Medico-Religious Committees.

Under the able leadership of Drs. LeRoy Kendrew and John Bandeian, this committee has met with Protestant, Catholic and Jewish clergy to discuss matters of common interest. Gradually a forum has been evolved where frank and effective discussion is conducted despite varying theological and medical background. Our internal communication is excellent. We have reviewed such topics as: "The Patient Facing Death"; "The Use of *Extraordiary* Medical Measures"; "Doctor-Clergy Consultations"; "The Relationship Between Pastoral Counselling and Psychiatric Care"; "Medical Requirements of Specific Religious Faiths", and "Medical Problems With Extensive Social Implications".

An unexpected by-product of improved communications with the clergy has been improved communication with our patients. The insight and confidence we have gained in our committee discussions has allowed us to exchange ideas more effectively with patients who face difficult problems. At present, the committee is exploring methods of sharing this benefit with others.

A forum held in early 1964 attracted over 50 nurses, but only 3 physicians. Because of this response, it would seem unwise to solicit support from the physicians of the district, but we cordially invite interested physicians to attend our committee meetings. We do intend to ask local nursing groups for an opportunity to present Medico-Religious discussions of various types. Church, clerical, and collegiate organizations may also be approached. Our purpose is not only to further the total care of the patient but also to improve the image of the physician by showing our concern for the intangibles of medical care, Again our aim is communication, and the committee is open to any and all suggestions as to how this can be accomplished.

As noted elsewhere in this issue, the February District Meeting will present Reverend Paul B. McLeaves, Director of the Department of Medicine and Religion of the American Medical Association. The officers of our Society are to be congratulated for persuading this fine speaker to allot us part of his crowded schedule. He is a far more eloquent exponent of our responsibilities in this field than I will ever be. Those who take time to attend this meeting will be well rewarded. Perhaps he will propose new avenues to improve communication with our patients, with each other, and with those who also seek to care for the total needs of the patient.

Cover: Conceived and designed by Dr. Ayres; photography by Mr. Raymond E. Willis.

MEDICINE AND MEDICAL ETHICS

The possible impact of Medicare on the everyday practice of medicine was considered in a previous issue of the "Hippocrat" (September, 1965). The following questions were then raised: Will Medicare dilute the quality of medical care in our midst? Will it overtax our hospitals and other diagnostic and therapeutic facilities? Will it enmesh the physician in the usual governmental quagmire of paperwork and boondoggling bureaucracy?

We may pose yet another question: What conflicts if any will medicare create between the physician and his code of ethics? We have already learned that it would be neither unlawful nor unethical for the inidividual physician to refuse participating in the Medicare program. However, for an organization, such as the AMA, to do the same would be illegal, hence also unethical. Our ethics, as we all know, insist on strict obedience of the law.

The very idea of Medicare smacks of the unethical. Medicare, in the opinion of many, threatens to undermine medicine. This being the case we have no right ethically to participate in its program. Section 6 of the AMA's Code of Ethics is very specific: "A Physician should not dispose of his services under terms or conditions which . . . . tend to cause a deterioration of the quality of medical care."

Another likely problem of ethics is that of professional secrecy. The government, it may well be surmised, will not be satisfied with a mere statement of diagnosis (e.g. in the case of Blue Shield), but will require complete reports, including details of the patient's past and family histories. Our professional codes proscribe the divulgence of confidential information. How to comply with the government's request for such information without at the same time violating our ethics is a challenge we must be prepared to meet in the very near future.

Also, the physician will unquestionably find himself pressed for all sorts of certificates. Under Medicare regulations all hospital and nursing home admissions have to be physician-certified, and also recertified by him every twenty days. "Certification pressures" by patients and their families, of the type reported from Great Britain, are frequently difficult to resist, but resist we must if we are to observe the letter and/or the spirit of the law, and hence also of our code of ethics.

The government has designated the physician as the key to the functioning of Medicare. It is ironic that we who have fought so bitterly against this law should now be charged with the responsibility of implementing it. If Medicare fails to maintain the excellence of present-day medical care, the fault, let us hope, will not be ours. The politicians unquestionably will be most anxious to lay the blame at our door. Organized medicine may decide to

fight for the modification or even repeal of Medicare. In the meantime, however, we will continue to cooperate unswervingly with Medicare even if it necessitates the alteration of some of the principles of ethics enunciated by our state and national societies. For it goes without saying that codes of law always take precedence over any and all codes of ethics.

Millman

FROM THE EDITOR'S DESK

With the January, 1966 issue the "Hippocrat" begins its 10th year as a bulletin appearing on a monthly basis.

The special "Academy" issue of the "Hippocrat" (Nov., 1965) provoked considerable comment in the corridors and staff rooms of the hospitals. Some of the suggestions: (1) Our District Society should absorb and perpetuate the functions of the Academy. (2) The total number of meetings of the two organizations per annum should be reduced to eight: four District and four Academy meetings (the total now is 13), and (3) a "summit" meeting of the officers, and perhaps some interested past officers, of the two organizations should meet soon to consider the merger.

The "Hippocrat" welcomes Setrag A. Zacarian, M.D., Springfield, recently elected an Associate Editor by the Executive Committee.

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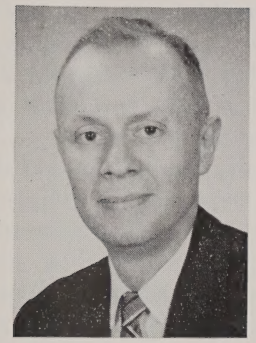
President's Page



PACEM IN TERRIS

In a world that knows violence almost as a way of life, men of good will still yearn for peace on earth for all mankind, everywhere. As we celebrate the Holidays which reaffirm man's hope for the world, it is wise to recall the words of Abba Eban, "Peace is not something to be inherited by aspiration alone. It will be attained, if at all, by action in its service."

So, may the spirit of hope, joy, and love that pervades us all during this bright season, remain with us throughout the year.

For each of you I wish a Christmas that is merry and a new Year that is happy, and for us all, Peace on Earth.

Henry Burkhardt, M. D.

MEDICAL ETHICS IN RETROSPECT*

The earliest written code of ethical principles for medical practice was conceived by the Babylonians around 2500 B.C. That document, the Code of Hummurabi, was indeed a *code* of conduct, setting forth in considerable detail for that era of history the nature of conduct demanded of a physician. Today that code would be subject to criticism because it went into too much detail. It may be doubted that it could have continued, as a practical document, through the centuries because, as medical science and cultural patterns became more complex, it would have required one skilled in jurisprudence to codify and interpret the myriad situations covered by it.

The Oath of Hippocrates, a brief statement of principles, has come down through history as a living and even workable statement of ideals to be cherished by the physician. This Oath was conceived some time during the period of Grecian greatness, probably in the fifth century B.C. It protected rights of the patient and appealed to the inner and finer instincts of the physician without imposing sanctions or penalties on him. Other civilizations subsequently developed written principles, but the Oath of Hippocrates (Christianized in the tenth or eleventh century A.D. to eliminate reference to pagan gods) has remained in Western Civilization as an expression of ideal conduct for the physician.

The most significant contribution to ethical history subsequent to Hippocrates was made by Thomas Percival, a physician, philosopher, and writer of Manchester, England. In 1803, he published his *Code of Medical Ethics.* His personality, his interest in sociological matters, his close association with the Manchester Infirmary, led to the preparation of a "scheme of professional conduct relative to hospitals and other charities," from which he drafted the code which bears his name.

At the first real meeting of the American Medical Association in Philadelphia in 1847, the two principal items of business were the establishment of a code of ethics and the creation of minimum requirements for medical education and training. Although the Medical Society of the State of New York and the Medico-Chirurgical Society of Baltimore had had formal written codes of medical ethics prior to this time, it is clear from the records and

* From the 1965 Report of the Judicial Council of the AMA.

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the preface to AMA's first adopted Code of Ethics that it was based on Percival's Code.

In general, the language and concepts of the original Code adopted by the Association in 1847 remained the same throughout the years. There were revisions, of course, which reflect the temper of the times and the eternal quest to express basic concepts with clarity. Major revisions did occur in 1903, 1912, and 1947. In 1947 the language of the chapter dealing with compensation of physicians, contract practice, conditions of medical service, free choice of physician, and purveyal of medical services was redrafted.

In December, 1955, an attempt was made to distinguish medical ethics from matters of etiquette. A draft of a two-part code seeking to accomplish this was submitted to the House of Delegates at that time but was not accepted. This proposal was, in effect, a segregation of then existing statements, found in the *Principles,* into two categories. Little or no change was made in the language of the forty-eight sections of the *Principles.*

Subsequently, in June, 1956, a seemingly radical proposal was submitted to the House of Delegates for consideration. This proposal, a short version of the *Principles,* was discussed at the following session of the House, in December, 1956, after having had wide publication and broad consideration among members of the medical profession. It was then laid over for final consideration at the June, 1957, meeting of the House of Delegates, at which meeting the short version was adopted.

(over)

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The format of the *Principles* adopted in June, 1957, is a change from the format of the *Principles* promulgated by Percival in 1803 and accepted by the Association in 1847. Ten short sections, preceded by a preamble, "Succinctly express the fundamental concepts embodied in the present (1955) Principles," according to the report of the Council on Constitution and Bylaws. That Council assured the House of Delegates in its June, 1957, report that "every basic principle has been preserved; on the other hand, as much as possible of the prolixity and ambiguity which in the past obstructed ready explanation, practical condification and particular selection of basic concepts has been eliminated."

Almost immediately after the 1957 edition of the *Principles of Medical Ethics of the American Medical Association* was adopted, the Judicial Council of that Association expressed its formal opinion that:

> ". . . the 1957 edition of the *Principles* was not intended to and does not abrogate any ethical principal expressed in the 1955 edition of the *Principles of Medical Ethics of the American Medical Association*. The format and language of the 1955 and 1957 editions differ; certain items dealing with professional manners and etiquette have been eliminated. However, the basic ethical concepts they include are identical. Therefore, no opinion or report of the Council interpreting these basic principles which were in effect at the time of the revision has been rescinded by the adoption of the 1957 edition . . . "

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1. Conant, R. G.: Reduction of industrial time-loss: treatment with carisoprodol compound in musculoskeletal disorders. Industr. Med. Surg. *33*:25, Jan. 1964.

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NEW "ETHICS" PROGRAM

The House of Delegates of the AMA has recently approved a new expanded program on medical ethics.

Here are the objectives of the new program:

Stimulate the individual physician . . . "to encourage him to make this area (medical ethics) more relevant and meaningful in his professional life. . . ."

Promote professional unity . . . "by encouraging all physicians to be more aware of their common bonds of professionalism and by encouraging them to resolve any differences within, rather than without, the profession."

Anticipate and resolve problems . . . "before they become acute. . . ."

Provide guidance on moral problems.

Improve grievance and disciplinary procedures.

Improve understanding of medical ethics . . . "by physicians, lawyers, legislators, other public officials, and the public. . . ."

Promote the concept of professionalism . . . "within the medical profession and with other worthy professions."

Activities to accomplish these objectives have already begun.

A National Congress on Medical Ethics and Professionalism was held by the Judicial Council on **Oct. 2-3, 1965,** in Chicago. Participants exchanged ideas and discussed medical ethics, professionalism, discipline and grievances.

COMING EVENTS

HAMPDEN DISTRICT MEETING, FEBRUARY 1

EXECUTIVE COMMITTEE MEETINGS, DECEMBER 21 and JANUARY 12

ACADEMY OF MEDICINE, JANUARY 11

CENSOR MEETING, MAY 5

M.M.S. COUNCIL MEETING, FEBRUARY 9

AM. COLLEGE of PHYSICIANS, NEW YORK, APRIL 18-22

M.M.S. ANNUAL MEETING, BOSTON, MAY 16, 17, and 18

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RELIGION, ETHICS, AND MEDICINE *

According to Maimonides
(1135 — 1204)

As a Rabbi, Maimonides based his medical practice on religion and ethics. He had a profound concept of the relation between medicine and religion. He believed that a healthy body is a necessary pre-condition for a healthy soul. He extended and integrated the concept of body and soul.

We find in his medical writings those truths that need to be restated again and again — truths about the ethics of medicine. Maimonides said that the physician must always be conscious of the high purpose of his profession, that only the properly educated and trained physician deserved his patient's confidence. He condemned not only charlatans and alchemists that were so common in his day, not only those who practiced witchcraft and necromancy, but also physicians who practiced without enough knowledge of their science.

In all his writings, Maimonides attempted to reconcile faith with reason, and the scriptures with the philosophy of Aristole. Nevertheless, whenever Aristotlism postulates ran counter to the tenets of the Jewish religion, he did not hesitate to reject them, and to give forthright reasons for doing so.

Physicians through the ages were wont to manifest in prayer the sense of the profound moral responsibility of their profession; they prayed for divine assistance in the exercise of their calling.

The oath and prayer composed and recited daily by Maimonides was described by Dr. William Oslar as "one of the most precious documents of our profession, worthy to be placed beside the Hippocratic Oath."

THE OATH AND PRAYER OF MAIMONIDES

THE OATH:

> The Eternal Providence has appointed me to watch over the life and health of Thy creatures. May the love for my art actuate me at all times; may neither avarice, nor miserliness, nor thirst for glory, or for a great reputation engage my mind, for the enemies of Truth and Philanthropy could easily deceive me and make me forgetful of my lofty aim of doing good to Thy children.
>
> Grant me strength, time and opportunity always to correct what I have acquired, always to extend its domain, for knowledge is immense and the spirit of man can extend infinitely to enrich itself daily with new requirements.
>
> Today he can discover his errors of yesterday and tomorrow he may

obtain a new light on what he thinks himself sure of today.
O God, Thou has appointed me to watch over the life and death of Thy creatures; here am I ready for my vocation.

THE PRAYER:

And now I turn unto my calling. O stand by me, my God, in this truly important task. Grant me success. For, without Thy loving council and support, Man can avail naught. Inspire me with true love for my art and for Thy creatures. O grant that neither greed for gain, nor thirst for fame, nor vain ambitions may interfere with my activity, for these I know are enemies of Truth and Love of men and might beguile one in profession from furthering the welfare of Thy creatures. O strenghten me. Grant energy unto both body and soul that I can help the rich and poor, the good and bad, enemy and friend. O, let me e'er behold in the afflicted and suffering only the human being.

* From an address by Samuel Segal, Jr., M.D., delivered before the Maimonides Medical Club, Springfield, May 26, 1965.

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Obligations of County Medical Societies

The Council has emphasized the autonomy of the county society and the fact that such autonomy imposes responsibilities. If medical societies fail to accept and discharge their obligations in matters of ethics, others will assume these obligations by default. The Judicial Council urges county and state societies to adopt critical attitudes toward their programs to "uphold the honor and dignity" of the profession of medicine. These programs must be based on a sound knowledge and understanding of ethical principles. As long as ethical principles are widely and sedulously observed, the reputation of the medical will be commemsurate with the services rendered in the observation of these ideals. On the other hand if there is flagrant or even careless disregard of ethical principles, the reputation of the profession of medicine will suffer and its responsibilities and obligations will be usurped by others.

(*House of Delegates,* 1958.)

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Left to right:

Dr. Richard Paul; Mrs. Richard Paul, General Chairman, White Cap Ball; Mrs. Raymond Conway, Auxiliary President - H.D.M.S., and Dr. Raymond Conway.

Number thirteen, contrary to superstition, turned out to be a lucky number for the Woman's Auxiliary to the HDMS. Its thirteenth Annual "White Cap Ball" held on November 6th at the beautiful new Twin Hills Country Club was one of the largest ever held, with more than 300 doctors, their wives and guests attending. A roast beef dinner was served at eight and dancing was enjoyed until midnight, with music provided by Bernie Cohen's orchestra.

The "Nurses' Recruitment Theme" was carried out by the use of Florence Nightingale lamps, nurses' caps, and robes imaginatively displayed within gold picture frames. All proceeds from this affair are used to provide scholarships in nursing and allied fields. Because of the excellent response each year, the Auxiliary is able to successfully carry on its work of helping Hampden District students.

p Ball

Left to right:

Dr. and Mrs. Stephen A. Mahoney, II, (Holyoke); Dr. and Mrs. Francis Kanski, (Springfield); Dr. and Mrs. William Walthall, Jr., (Westfield); Mr. Robert Nicholson, and Miss Therese Harney, guests, (Worcester).

Mrs. Richard Paul was general chairman of arrangements with Mrs. Joseph Angelica serving as co-chairman. Mrs. Raymond Conway, president of the Auxiliary, was honorary chairman. Other committee chairmen were:

Decorations - Mrs. John Maloney
Invitations - Mrs. William Walthall
Reservations - Mrs. Joseph Greenspan
Publicity - Mrs. Sante Caldarola
Hostesses - Mrs. Leandre Giguerre
Scholarship Treasurer - Mrs. William Mosig
Music - Mrs. Carlo Montori

Mrs. F. M. H. Ziter
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SPORTS INJURY PROGRAM

Seated left to right: Dr. Thomas B. Quigley, Harvard Medical School, keynote speaker; Dr. Henry Burkhardt of Holyoke, president of the Society; Dr. Roland Stebbins of Holyoke, chairman of the program. Standing, left to right: Dr. Peter V. Karpovich, research professor, Springfield College; Dr. Robert N. LaMarche of this city; Dr. Joseph Hahn of this city, and Dr. Robert D. O'Malley of Holyoke.

About 200 coaches, trainers, nurses, and even mothers of sports-minded youngsters attended the Sports Injury Program sponsored by the HDMS on December 1, 1965 at the Springfield Municipal Hospital.

Dr. Thomas B. Quigley of Harvard keynoted the proceedings by outlining a "bill of rights" for athletes. Amongst those mentioned were: good coaching in fundamentals, good equipment, initial pre-season examinations to "weed out" potentially injury-prone persons, proper matching of teams on basis of maturity rather than chronological age, and on-the-spot medical attention and supervision of the injured with final say on continuance or return to competition based categorically on professional medical judgment.

Dr. Karpovich of Springfield College spoke of his researches on various phases of physiology and athletics. For instance, traditional "warm-up" exercises before competition do not increase efficiency of athletes. The breaking of records can be predicted on the basis of measuring amounts of oxygen used by athletes. Moreover, less energy is required by the arms rather than legs for efficient power in swimming; hence, to move the body an equal dis-

tance through water, more reliance should be placed on the "stroke" than the "kick".

Dr. O'Malley discussed the general principles of handling the "player who is down." Proper officiating and good sportsmanship can prevent many sports injuries. Institution of proper first aid on-the-spot and proper movement from the field of competition under supervision is most essential.

Dr. LaMarche spoke of orthopedic problems, particularly, injury to growing bones, such as epiphyseal line fractures which could lead to permanent disabilities; injury to joint cartilage resulting in joint "mice"; and avoidance of such traumatizing techniques as "pitching curves" by youthful sandlot baseballers.

Dr. Hahn cautioned that brain injuries can be difficult to pick up; therefore, any player "knocked out" should be restricted from any further participation in contact sport competition and kept under close observation and supervision. All panelists concurred that, once an injury does occur, prompt treatment, carefully administered, is mandatory. Quoting Dr. Quigley, the immediate hour after an injury is "the golden moment" when more can be done than at any later time.

Generally, the program seemed to be very well received and hopes were expressed that similar presentation would be coming in the future.

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ADDRESS

IN THE NEXT ISSUE

(JANUARY)

OF THE

"HIPPOCRAT"

HAMPDEN CAPSULES

On WWLP: Drs. T. McCarthy, Aborjailly, and Parenteau, with Kitty Broman, Tuesday, Jan. 4, "Use of Estrogen — Pro and Con".

— —

Dr. Ralph O. Brown, with Wesson Emergency Associates, transferred from Bristol North to Hampden District.

— —

Dr. Paul Ashton spoke to Pro Christo Club at South Church on "Endocrinology".

— —

Dr. Rapinchuk spoke to Woman's Club at First Church on Mental Health.

— —

Dr. LaMarche spoke at Colony Club to insurance men on "Medicare".

— —

Many of the physicians taking the Speech Training Course took turns and went across the street to WSPR to tape some "Health Tips" from the AMA.

Speakers:

Dr. Helen A. Papaioanou at:
Panel Discussion, "Civil Rights"
Junior High "Human Growth"
Easthampton Church "Fit to Be Tied"
Granville PTA "Sex Education"
St. John's Lutheran, Woman's Society

— —

Dr. J. Fletcher Wonson, (with Dr. Papaioanu) at Easthampton Church.

— —

Dr. LaMarche on TV-WHYN.

— —

Dr. Maloney on TV-WHYN, on Diabetes Detection Week.

— —

Radio programs:
Dr. Booker - Community Health Week
Dr. Izenstein - - - Diabetes Detection Week
Dr. Zacarian - Dermatology
Dr. LaMarche - Sports Injury Program

— —

Malcolm S. Allan, M.D., 42 Ridgewood Terrace, Springfield, will limit his practice to Gynecology, as of December 1, 1965.

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DECEMBER (7)
MEETING HIGHLIGHTS

PLACE: Sheraton Motor Inn, Springfield

TIME: 6:35 P.M. In attendance: 220 against 205 reservations. . . .

In the absence of President Burkhardt (because of a sudden and tragic death in his family) Vice-President Hayes calls meeting to order. . . . Minutes of previous meeting are read by Secretary Memery. . . . Dr. Boss, Jr. reports for the Mental Health Committee. . . . Dr. Mozden reports for the Disaster Medical Care Committee. . . .

Dr. Hayes announces that, according to the AMA News, it isn't necessary for the physician to sign the Civil Rights Oath as formerly reported. . . . He reports also that a Public Hearing on Mental Health programs for Mass. will be held on December 13 at the Municipal Hospital Auditorium, Springfield. . . .

The business meeting is followed by a convivial social hour which in turn is followed by a delicious roast beef dinner. . . . Dr. Hayes introduces the "Head Table" which includes Dr. Claude E. Welch, President of the MMS, Dr. A. W. Newton, President of Franklin District Medical Society, Mr. J. Gordon, Executive Secretary, Hartford County Medical Society, Mr. T. Chilcoat, Field Representative of the AMA, and Mr. Ed. Donnellan, Field Representative of AMPAC and BAYPAC. . . .

Guest speaker of the evening is Dr. James Z. Appel, President, AMA. . . . He is greeted with a standing ovation. . . . His address (see next issue of "Hippocrat"), is very well received. . . .

Meeting adjourns at 9:35 p.m.

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EXECUTIVE COMMITTEE MEETING (Highlights)

The regular monthly meeting of the Executive Committee was held on November 16, 1965 at the HDMS meeting room. The meeting called to order at 8:08 P.M. by President Burkhardt. Present were: Drs. Moore, Mozden, Memery, Miner, Adham, Griffin, LaMarche, O'Malley and Mrs. Purdy.

Minutes of the October meeting were read and approved as read by the Secretary.

The Treasurer gave his report.

Letters

A letter of thanks was read from the Art League.

An informational letter was read from Lessere-Wertheim, Inc., and will be referred to the Members Insurance Committee.

Informational letters were read from Bristol South Medical Society and Mercy Hospital.

Dr. Mozden gave a report of the Disaster Medical Care Committee. A Disaster Drill, planned for the Spring of 1966, was approved by the Executive Committee.

Mrs. Purdy gave a brief report of "office doings". Committees that have met since the last meeting are: Public Health, PR with the Press, Disaster Medical Care, Medico-Religious, and Mental Health. The movie "Quarter Million Teenagers" has arrived at the HDMS office and is presently booked for two meetings. Eight members of the Woman's Auxiliary have successfully finished a "Medical Self Help Course."

Old Business

Due to requests from physicians for draft deferments, it was necessary to appoint a Medical Advisory Committee again. Therefore, Dr. Burkhardt appointed Dr. Walter Mozden as the Chairman, with Drs. Robert Kelley, J. J. Arenstam, H. H. Shuman, and E. Halton as the committee.

Final arrangements are being made for the December HDMS Meeting with the anticipation of Dr. Appel's visit. Presidents of Berkshire, Franklin and Hampshire Districts are invited, as well as Dr. Claude Welch, President and Dr. Robert Buck, Secretary of the MMS., the President and Executive Secretary of the Hartford County Medical Association.

Absorbine Jr.

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Ernest A. Byron

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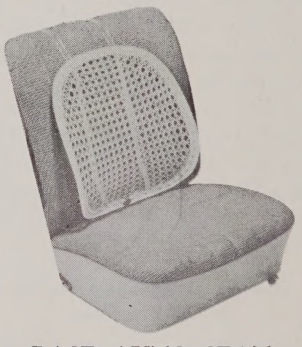

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IN MEMORIAM

ROGER GILBERT ROBITAILLE, M.D.
1917 - 1965

Doctor Roger G. Robitaille of 85 Madison Ave., Holyoke, died on November 20, 1965 in the Providence Hospital.

Born in Holyoke, Mass. on January 10, 1917, Dr. Robitaille attended Assumption College, Worcester, and University of Mass., Amherst, receiving his medical degree from the University of Montreal, Canada in 1945. After interning at the Notre Dame and Sacred Heart Hospitals in Montreal, he was a resident physician for two years at the Norwalk General Hospital, Norwalk, Conn. Thereupon, he entered into the private practice of medicine in Norwalk, Conn., and then, in 1955, came back to Holyoke where he had been in general practice ever since.

Mr. Robitaille served on the medical staffs of the Holyoke and Providence Hospitals. He was a member of the American Medical Association, the Mass. Medical Society, and the Hampden District Medical Society. During the Korean War, he served in the Medical Corps of the U.S. Air Force.

Deepest sympathy is hereby extended to his family and to his many friends and associates.

Plan to Attend the

February First Meeting of

HAMPDEN DISTRICT MEDICAL SOCIETY

GUEST SPEAKER:

REV. DR. PAUL B. McCLEAVE, Director

Department of Medicine and Religion, AMA

For details see the next (January)

issue of the Hippocrat.

CORRESPONDENCE

Dear Hippocrat:

We are happy to announce that our booklet entitled "Cookbook for Low Sodium Diet" has been revised and is now available to physicians and nutritionists at no charge.

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This booklet of receipes is a practical one, written for the patient on a low sodium diet and for the one who does the cooking for the person on a low sodium diet. Equally important, it considers the needs of other members of the family who are not on a restricted diet. Here is a guide to a balanced, wholesome diet with small changes, which make possible the day-to-day job of keeping the entire family well fed and happy.

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PUBLIC HEALTH COMMITTEE

The following letter was received by the Public Health Committee under date of November 5, 1965.

D. E. Booker, M.D., Chairman

Dear Dr. Booker:

You will recall that during the summer I alerted you to the state-wide program for the primary prevention of rheumatic fever through the setting up of regional laboratories prepared to examine throat swabs for group A beta hemolytic streptococci by the fluorescent antibody method. You agreed to pass this information on to members of your district society. The program has now started and the laboratory to serve the western health region is ready to receive throat swabs. The laboratory is located at the:

Department of Microbiology
University of Massachusetts
Amherst, Massachusetts 01003

The service, as well as special culture collecting outfits assembled for the program, will be free of charge to any physician in the State. The culture outfits may be obtained by contacting local boards of health; Mr. Clyde Sayles, Western Chapter of the Mass. Heart Association, 145 State Street, Springfield, 739-4795; or the Mass. Heart Association, 636 Beacon Street, Boston, Mass. 02215.

Jerome S. Paterson, M.D.
Regional Director
Mass. Dept. of Public Health

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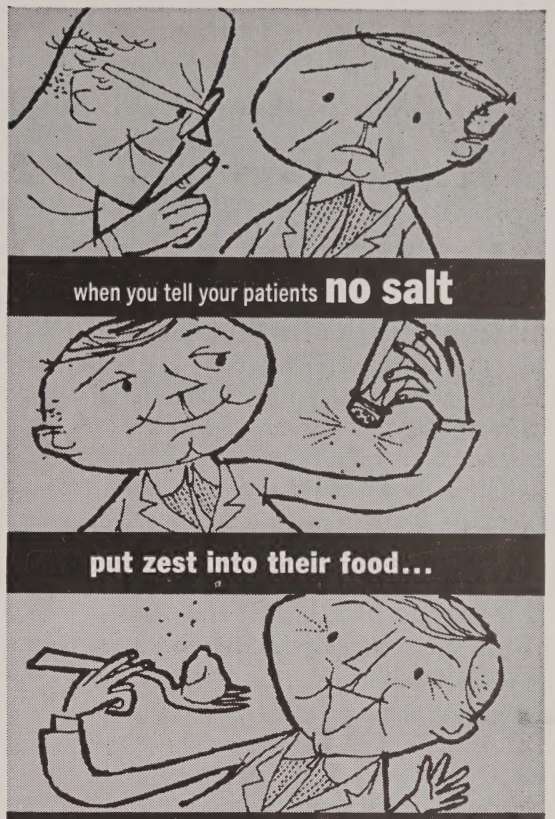

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MENTAL HEALTH CONFERENCE

The second state-wide Conference on Mental Health was held at the Sheraton-Boston Hotel on October 20, 1965 under the auspices of the MMS. The main speakers were Dr. James Appel, President of the AMA, Dr. Daniel Blain, Professor of Psychiatry, University of Pennsylvania, and Lieutenant Governor Richardson. The major part of the day was devoted to a very general discussion of the mental health problems in Massahusetts. Moderators were Dr. Dana Farnsworth, a member of the Mental Health Council of the AMA and Dr. George Gardner, also a member of the Council and Professor of Psychiatry at the Harvard Medical School.

The problems of mental health in Massachusetts have been the subject of a two year study by several task forces under a grant from the Federal Government. This report has now been compiled and is ready for publication. It will probably suggest changes in the way mental health is handled in Massachusetts. The present conference was intended to supplement this report by getting the feeling of the medical profession in Massachusetts.

It was pointed out that psychiatry lacked the man power to handle this problem in existing facilities and that federal funds were available for the construction and staffing of mental health centers in the Commonwealth. Two of these centers, at Lowell and Fall River, are being built with no particular planning. The one in Pittsfield was so pre-planned by the local group as to find itself in difficulty with the Department of Mental Health. The Commissioner stated that in Springfield the medical profession had been so obstructive that nothing had been done until now and that he thought things were beginning to change. This, notwithstanding the fact that the HDMS had sponsored the original study of local needs and of a corporation to implement it. Members of our Society have helped set up the present Board of Directors of the Springfield Mental Health Services, Inc., and approxi-

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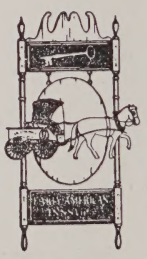
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nately 50% of the directors are members of this Society.

Mention was made of efforts to enlist the general practitioner in mental health work but it was pointed out that these practitioners are becoming very scarce and do not have the time to handle the many acute cases clamoring for attention. The subject of prevention of mental illness was discussed, but it would seem difficult to prevent what cannot even be defined other than by the "great society's" hope of happiness for all, which seems quite unlikely.

The general opinion of the meeting seemed to be that great changes are needed in the management of the growing number of misfits and that new concepts and regulations are needed. The Lieutenant Governor stated that new legislation will be presented at the next session of the Legislature but the medical profession must be on its guard, lest it be by-passed and social agencies take over that which logically falls in the domain of the medical profession.

Miller

(Editor's Note: On December 13, Public hearings on "Mental Health for Mass." were held at the Springfield Municipal Hospital Auditorium. A report of these hearings will be published in the next issue of the "Hippocrat".)

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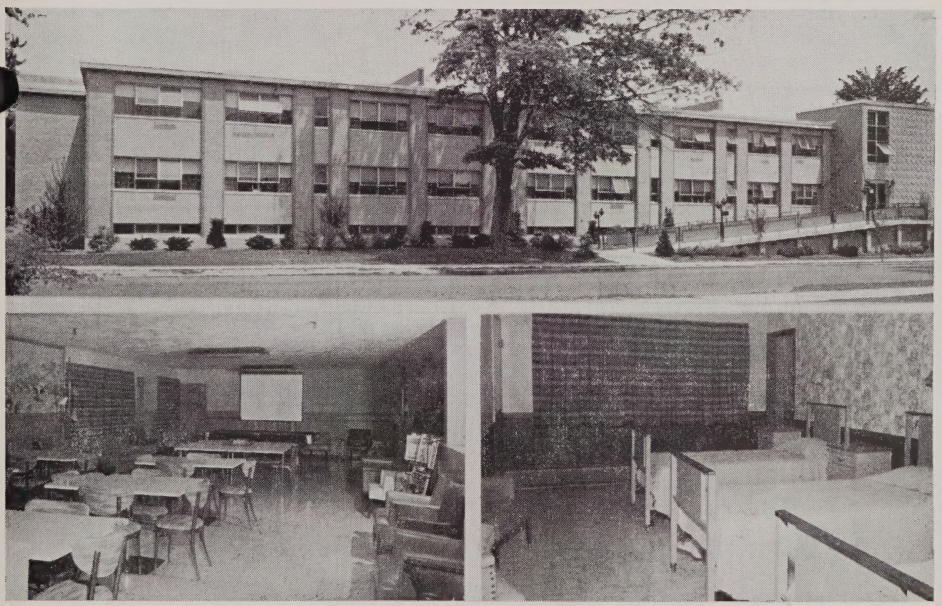

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Topic:	CANCER SURGERY
Place:	Auditorium, Municipal Hospital Springfield
Hospital Clinic:	Wesson Memorial, 5:00 P.M.

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